& 2001

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G82613

FILED

01 FEB 26 AM 10: 33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 00-01

DO NOT WRITE IN THIS SPACE

1. Entity Name

BRASS RAIL SALOON, INC.

Principal Place of Business	Mailing Address

2. Principal Place of Business	3. Mailing Address
1065 S. Vineland Rd.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Winter Garden, FL	City & State
Zip: 34787 — Country: USA	Zip — Country

4. FEI Number: 59-2434504 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
	Name: Currie, James E.
	Street Address (P.O. Box Number is Not Acceptable): 1065 S. Vineland Rd.
	City: Winter Garden — FL — Zip Code: 34787

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE X [signature] — 2/21/01

Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ — $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Delete	TITLE: PTD NAME: Currie, James E. STREET ADDRESS: 1065 S. Vineland Rd. CITY - ST - ZIP: Winter Garden, FL 34787	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Delete	TITLE: VSD NAME: Beaudoin, Wannee STREET ADDRESS: 1065 S. Vineland Rd. CITY - ST - ZIP: Winter Garden, FL 34787	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	☐ Change ☐ Addition

LS

800003796328--9
-03/02/01--01079--008
****900.00 ****900.00

CR2E034(9/99)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X [signature] — 2/21/01 — 407-925-7665

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

James E. Currie, President